Municipality of Anchorage
Declaration of Candidacy

Service Area Board of Supervisors
Term ends 2027

I hereby declare my candidacy for the ___GIRDWOOD VALLEY___ Service Area Board of Supervisors, Seat ___A___. If elected, I agree to serve for a 3-year term, expiring upon certification of the April 2027 Regular Municipal Election. I do hereby swear (affirm) that:

(1) I am a qualified voter of the municipality; *and*

(2) I have been a resident of the service area stated above for 90 days immediately preceding the April 2, 2024 election. (You are certifying that you have been a resident of the service area since January 3, 2024.)

It is further understood that I may withdraw my declaration of candidacy at any time by filing a statement under oath with the Municipal Clerk in accordance with AMC 28.30.030D. I understand that if I file my request to withdraw after 5:00 p.m. on January 30, 2024, the Municipal Clerk has the sole discretion to remove my name from subsequent notices and the ballot.

The following information will appear on the municipal election website. Please write legibly.

___JENNIFER WINGARD___ Candidate Name	___JENNIFER WINGARD___ **Name as it should appear on ballot**

___124 VAIL DR, GIRDWOOD, AK 99587___
Residence Address, City, State, and Zip Code

___PO BOX 742, GIRDWOOD, AK 99587___
Mailing Address, City, State, and Zip Code

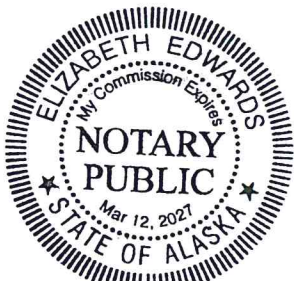|	
___(907) 240-3222___ Phone Number	___(907) 240-3222___ Office Phone Number & Fax Number
___girdwoodgalaxy@gmail.com___ Email Address	___ Website Address

I hereby swear (affirm) that the above declaration and all statements contained herein are true and correct.

___(signature)___
Signature of Candidate

DATED THIS ___24th___ day of ___January___, 2024

State of Alaska)
)SS
Third Judicial District)

THIS IS TO CERTIFY that on this ___24___ day of ___January___, 2024, before me the undersigned, a Notary Public in and for the State of Alaska, personally appeared ___Jennifer Edith Wingard___ known to me and known to be the individual named in and who executed the foregoing instrument and he/she acknowledged to me that he/she signed the same freely and voluntarily for the uses and purposes therein stated.

WITNESS my hand and official seal the day and year last written above.

___(signature)___
Notary Public in and for Alaska
My Commission expires: ___3/12/2027___

Rev. 08/2023